

# The Rise Group Practice

## Inspection report

Hornsey Rise Health Centre  
Hornsey Rise  
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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

## Ratings

### Overall rating for this location

Good 

Are services safe?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

# Overall summary

We carried out an announced comprehensive inspection at the Rise Group Practice (the practice) on 13 January 2020 as part of our inspection programme, following our annual review of the information available to us. The service had last been inspected in March 2016, when we had rated it Good for all key questions and population groups. Our previous inspection report can be found by going to <https://www.cqc.org.uk/location/1-569174475> and selecting the Reports tab.

At this inspection we have rated the provider as Good overall and in respect of the key questions Effective, Caring, Responsive and Well-led and for the six population groups. We have rated it as Requires improvement for providing Safe services.

We based our judgement of the quality of care at this service on a combination of

- what we found when we inspected
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

We found that:

- The practice had systems and processes to keep people safeguarded from abuse. However, there was insufficient evidence that other safety aspects including fire and legionella risk assessments and training for staff were effectively monitored or provided.
- Published Quality and Outcomes Framework (QOF) data showed the practice's overall clinical performance had improved in comparison with the two previous years' results.
- Patients received effective care and treatment that met their needs.

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.

The areas where the practice **must** make improvements are:

- Ensure that care and treatment is provided in a safe way.

The areas where the provider **should** make improvements are

- Continue with efforts to improve the uptake of cervical screening and childhood immunisation rates, and elements of care provided to patients with diabetes, and implement action to bring about and sustain improvement.
- Continue with the regular review of policies and protocols, for example relating to repeat prescribing, safety alerts and clinical guidance to ensure effective governance.
- Assess the risk of there being one defibrillator shared between the various services operating at the premises.
- Review the arrangements for providing easy read and pictorial healthcare guidance materials for patient with learning disabilities.

**Details of our findings and the evidence supporting our ratings are set out in the evidence tables.**

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## Population group ratings

<b>Older people</b>	<b>Good</b>	
<b>People with long-term conditions</b>	<b>Good</b>	
<b>Families, children and young people</b>	<b>Good</b>	
<b>Working age people (including those recently retired and students)</b>	<b>Good</b>	
<b>People whose circumstances may make them vulnerable</b>	<b>Good</b>	
<b>People experiencing poor mental health (including people with dementia)</b>	<b>Good</b>	

## Our inspection team

The inspection team was comprised of a CQC lead inspector, a GP specialist adviser and a practice nurse specialist adviser.

## Background to The Rise Group Practice

The Rise Group Practice (the practice) operates at Hornsey Rise Health Centre, Hornsey Rise, London N19 3YU, which it shares with other healthcare providers.

The practice provides NHS services through a General Medical Services (GMS) contract to approximately 5,200 patients. The practice area has a high deprivation level, being in the 2nd most deprived decile. Thirty-six percent of patients are of BAME background. It has an above-average prevalence of patients experiencing poor mental health.

The practice operates within the NHS Islington CCG, which is made up of 34 general practices. It is part of the North Islington Primary Care Network (PCN) made up of 13 other local practices. The practice is registered with the CQC to carry out the following regulated activities - diagnostic and screening procedures; treatment of disease, disorder or injury; surgical procedures; maternity and midwifery services; and surgical procedures.

The clinical staff is made up of two female GP partners, both of whom work five clinical sessions per week and two salaried GPs (one female and one male) working a combined further ten session, and two part-time practice nurses. The practice has a part-time personal medical assistant, who is qualified to perform NHS Health Checks, spirometry, etc. The administrative team is made up of a practice manager and five staff.

The practice's opening times are as follows: -

Monday 8:00 am - 1:00 pm and 2:00 pm – 7:30 pm

Tuesday 8:00 am - 1:00 pm and 2:00 pm – 7:30 pm

Wednesday 8:00 am - 1:00 pm and 2:00 pm – 6:30 pm

Thursday 8:00 am - 1:30 pm and 2:00 pm – 6:30 pm

Friday 8:00 am - 1:30 pm and 2:00 pm – 6:30 pm

Appointments with GPs commence at 9:00 am each morning. Pre-booked appointments run from 9:00 am to 11:00 am each morning, with a walk-in clinic operating between 11:00 am and 12:30 pm. Afternoon clinics run from 2:00 pm to 4:00 pm and evening clinics from 4:30 pm until the practice closes. Home visits and telephone appointments are available. Nurses' appointments begin at 8:00 am.

Extended hours service appointments are available at three locations in the borough, which operate from 6:30 pm - 8:30 pm, Monday to Friday and from 8:00 am - 8:00 pm on the weekends and public holidays.

The practice is closed at weekends and has opted out of providing an out of hours service. Patients calling the practice outside normal operating hours are put through to the local out of hours service provider.

## Are services safe?

There is limited assurance about safety.

- Systems processes, and practices are not always reliable or appropriate to keep people safe.
- There was insufficient evidence that all staff had the right qualifications, skills and knowledge to do their job.
- When things go wrong, people receive a sincere and timely apology and are told about any action taken to improve processes and procedures to prevent the same thing happening again.
- Staff recognise and respond appropriately to signs of deteriorating health and medical emergencies.

## Are services effective?

People have good outcomes because they receive effective care and treatment that meets their needs.

- People have comprehensive assessments of their needs, which include consideration of clinical needs, mental health, physical health and wellbeing.
- Information about people's care and treatment and their outcomes is routinely collected and monitored. This includes assessments, diagnoses, referrals to other services and management of people with chronic or long-term conditions.
- When people receive care from a range of different staff, teams or services, this is coordinated. Staff work collaboratively to understand and meet the range and complexity of people's needs.
- Staff are consistent and proactive in supporting people to live healthier lives and use every opportunity to identify where their health and wellbeing can be promoted.

## Are services caring?

People are supported, treated with dignity and respect, and are involved as partners in their care.

- Feedback from people who use the service, those who are close to them and stakeholders is positive about the way staff treat people.
- People are involved and encouraged to be partners in their care and in making decisions. They are communicated with and receive information in a way they can understand.
- People and staff work together to plan care and there is shared decision-making about care and treatment.
- Staff respond compassionately when people need help and support. Privacy and confidentiality are respected at all times.

## Are services responsive to people's needs?

People's needs are met through the way services are organised and delivered.

- Services are planned and delivered in a way that meets the needs of the local population.
- Care and treatment are coordinated with other services and other providers.
- People can access the right care at the right time. Access to appointments and services are managed to take account of people's needs.
- There is a daily walk-in clinic and the appointments system is easy to use. Waiting times, delays and cancellations are minimal and managed appropriately.

## Are services well-led?

The leadership, governance and culture promote the delivery of high-quality person-centred care.

- The practice is transparent, collaborative and open about performance.
- There are clear vision and values, and a realistic strategy, which reflect compassion, dignity, respect and equality. Staff know and understand the vision, values and strategy.

- Mechanisms are in place to support staff and promote positive wellbeing.
- Information on people's experience of the service is reported and reviewed alongside other performance data.



This section is primarily information for the provider

## Requirement notices

### Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p><b>Care and treatment must be provided in a safe way for service users</b></p> <p><b>How the regulation was not being met -</b></p> <p><b>There was insufficient evidence that assessments of the risks to the health and safety of service users receiving care or treatment had been carried out. In particular:</b></p> <ul style="list-style-type: none"><li>• The practice was not able to provide evidence at the inspection of a premises fire risk assessment. It later sent us a risk assessment that had been carried out in February 2020.</li></ul> <p><b>There was insufficient evidence that assessments of the risk of, and preventing, detecting and controlling the spread of, infections, including those that are health care associated, had been carried out. In particular:</b></p> <ul style="list-style-type: none"><li>• The practice was not able to provide evidence of a legionella risk assessment or management plan.</li></ul> <p><b>There was insufficient evidence that all of the people providing care and treatment had the qualifications, competence, skills and experience to do so safely. In particular:</b></p> <ul style="list-style-type: none"><li>• Records seen on the day of the inspection and updated ones provided afterwards showed gaps in staff training including fire safety, health and safety, infection prevention and control, basic life support, the Mental Capacity Act, Equalities and Diversity, Whistleblowing.</li></ul>